

L180000219545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



100318511071

100318511071
09/17/18--01003--013 **125.00

RECEIVED
DEPARTMENT OF STATE
18 SEP 17 PM 12:56

FILED
18 SEP 17 AM 8:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

SEP 18 2018

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Electronic Club House Sales, LLC

Signature _____

Requested by: Seth

09/17/18

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF ORGANIZATION FOR

Electronic Club House Sales, LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **Electronic Club House Sales, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is **235 Sunrise Avenue, Apt 2008. Palm Beach, FL 33480**

FILED
18 SEP 17 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Your Capital Connection, Inc. 417 E. Virginia St. Ste 1. Tallahassee FL 32301**

ARTICLE IV: AUTHORIZED MEMBERS

The name and address of each initial person authorized to manage and control the Limited Liability Company:

Cody Neeley, Authorized Member, 235 Sunrise Avenue, Apt 2008. Palm Beach, Fl 33480
Sierra Warner, Authorized Member, 235 Sunrise Avenue, Apt 2008. Palm Beach, Fl 33480

The undersigned has executed these Articles of Organization for filing purposes this 17th day of September 2018.

/S/ Cody Neeley,

Authorized Representative

Please send initial annual report reminders to codyneeley@gmail.com

FILED
18 SEP 17 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the company is: **Your Capital Connection, Inc.**
2. The name and street address of the registered agent and office is:

Your Capital Connection, Inc., 417 E. Virginia St. Ste 1. Tallahassee, FL 32301

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

/S/ Seth Neeley

Seth Neeley for Your Capital Connection, Inc.

FILED
18 SEP 17 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA